MAR 2 8 2005

#### CERTIFICATION OF FACSIMILE TRANSMISSION **UNDER 37 CFR 1.8**

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Cathy A. Schetzina

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Attorney Docket No. 5573-124

**PATENT** 

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Whittle et al. Serial No.: 09/648,490

Filed: August 25, 2000

Confirmation No.: 5616

Group Art Unit: 1614

Examiner: Kwon

For: FT-Raman Spectroscopic Measurement

Date: March 28, 2005

Submittal of:

RCE Transmittal (1 page)

Copy of Amendment Transmittal as Submitted on February 18, 2005 (2 pages)

Copy of Amendment as Submitted on February 18, 2005 (6 pages)

Copy of Terminal Disclaimer w/ copy of Assignment as Submitted on February 18,

2005 (7 pages)

## RESPONSE UNDER 37 C.F.R. 1.116 EXPEDITED PROCEDURE **EXAMINING GROUP 1614**

Attorney Docket No. 5573-124

PATENT

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Whittle et al.

Confirmation No.: 5616

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Serial No.: 09/648,490

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For: FT-Raman Spectroscopic Measurement

Date: February 18, 2005

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

Applicant claims small entity status. See 37 CFR §1.27.

No additional fee is required.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	4	20	= 0	x 25=	\$	x 50=	\$ 0.00
Indep	2	3	= 0	x100=	\$	x200=	\$ 0.00
1	ST PRESENTA P. CLAIM	ATION OF M	ULTIPLE	+180=	\$	+360=_	\$
				Total Add. Fee \$		OR Total	\$0.00

If the entry in Col. I is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Appli	mey Docket No.: 5573-124  colication No.: 09/648,490  d: August 25, 2000  e 2						
	Please charge my Deposit Account No. in the amount of \$ for						
	A check in the amount \$ to cover is enclosed.						
Ø	The Commissioner is hereby authorized to charge the appropriate fees associated with this communication or credit any overpayment to Deposit Account No. 50-0220.						
	Respectfully submitted,						
	lunch 2						
	Jarett K. Abramson Registration No. 47,376						

Myers Bigel Sibley & Sajovec, P.A. Post Office Box 37428 Raleigh, NC 27627 Telephone (919) 854-1400 Facsimile (919) 854-1401

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Karie A. Chung